

James

No. 8  
Amenorrhoea

Amenorrhoea

Robt. E. Bouldin

admitted March 24, 1870

of the nature of the complaint which is the first of the group of hysterical disorders, not being a simple hysterical disorder, but one which has been only a departure from the healthy condition of the Menstruation.

By Amenorrhoea is a flow of the Menstruation, we can say a periodical discharge of blood from the uterus resembling natural flow.

There has been much discussion among Physiologists relative to the nature of the discharges its origin, its nature.

By some it is considered to be entirely of the nature of blood.

Various for instance, some think it is a secretion of the uterine glands, others that it is a secretion of the uterine glands.

Chas. F. Bonnell

Sept 24 1891

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Amenorrhoea

Before entering into a disquisition of the subject which is the object of the following pages it may not be amiss to make some observations respecting Menstruation in its healthy state, Amenorrhoea being only a departure from this healthy condition of the Menses.

By Menstruation or a flow of the Catamenia is meant a periodical discharge of a fluid from the Uterus resembling arterial blood.

There has been much discussion amongst Physiologists relative to the nature of this discharge, its origin et cetera.

By some it is contended to be arterial, by others venous.

Vesalius for instance said it was Venous, and Ruysch on the contrary that it was Arterial.

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I am disposed to adopt the latter of these opinions, and indeed I believe it to be the opinion most generally entertained on this subject at the present day.

It has also been a point much controverted, whether this discharge proceeded from the Vagina, or Uterus.

Doctor Hunter it appears deserves the credit of having discovered its real origin the Uterus. In proof of its originality in Utero, women cease to menstruate during pregnancy, which would have no effect on it, if it came from the Vagina.

But on the other hand it has been urged that some women do menstruate during pregnancy, some only in the early months, but others during the whole period.

This at first sight might appear a difficulty not easily gotten over. It may however be accounted for in this way.

During the first months of pregnancy

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only a small portion of the Uterus is occupied by the Foetus, of course there is still a considerable secreting surface, and in the latter months when the Uterus is more completely occupied by the Foetus, may we not reasonably suppose that a small portion of the Vagina may be covered by a secreting membrane from which this discharge may still proceed?

The fluid discharged was long thought to be more blood differing only in viscosity. It certainly is not a hæmorrhage, for if it was it would coagulate, and that it does not is a point conceded I believe by all.

The celebrated John Hunter was perhaps the first who took notice publicly of this fact, at least in Great Britain.

He observed, that the blood discharged in Menstruation, is neither similar to blood taken from a vein of the same person, nor to that extravasated by an accident in any

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"other part of the body, but is a species of blood  
"changed, separated, or thrown off from the  
"common mass, by an action of the vessels  
"of the Uterus, in a process similar to secretion,  
"by which action the blood having lost its  
"living principle, it does not so easily coagulate."

The blood then may be deprived of this power  
of coagulation by several causes, as by light  
"ning, some kinds of small pox &c. But of this  
I have no certain knowledge.

The time at which this discharge makes  
its appearance may be varied by several causes,  
as the climate, state of the health &c. &c.

In Lapland for instance, according to Linnaeus  
women only menstruate during the summer  
months. In our own climate the commencement  
"out of menstruation is usually from fourteen  
to sixteen years of age; tho occasionally it  
may take place a little earlier.

In very warm climates we have accounts of

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girls menstruating at eight, and in those it is not an uncommon thing for a woman to become a mother at nine or ten yrs of age.

As to the quantity discharged, it may be compared generally at from  $\text{℥iv}$  to  $\text{℥vi}$ .

Hippocrates says  $\text{℥xx}$  that this is certainly too large a quantity, and should be considered more as an hemorrhage than as a real discharge of the catamenia.

It is indeed a difficult matter to ascertain the precise quantity, as most females from motives of delicacy are disposed to conceal it.

If however, as I have just observed more than  $\text{℥vi}$  are discharged it should be considered as an hemorrhage. 2

This discharge usually continues from five to seven days, sometimes not more than three, and in some cases even nine or ten. If it were more rapid it would be attended with

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very great inconvenience and the unhappy female would be liable to have her delicacy wounded by many unforeseen accidents.

When women arrive at from forty five to fifty the discharge becomes irregular frequently ceasing for three or four months and then becoming excessive. This is an important era in their lives, for if there be a disposition to cancer &c. it now makes its appearance.

Notwithstanding as before mentioned the most common period of the cessation of the menses is from forty five to fifty, yet there are cases mentioned of women menstruating at sixty, seventy, and at eighty and there is a case related by Doct. Brewster of one who had this discharge at the age of one hundred and six. Such cases tho. are to be considered as exceptions to a general rule.

Having now briefly spoken of the

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nature of the Menstrual discharge, its term  
of continuance, with a few of the most  
<sup>common</sup> symptoms attending it, I shall  
proceed to a consideration of some of the  
theories that have been advanced relative to  
its causes et cetera.

It was anciently believed  
and is by some even at the present day sup-  
posed to be under lunar influence. But were  
this the case then all women should men-  
struate at the same time; whereas we know  
that this discharge takes place at any  
time of the month totally regardless of  
the lunar phases. This however continued  
to be the belief till the time of Galen;  
he adopted the theory of plethora. He  
argued that women take generally assumed  
a limbo as men and much less exercise, con-  
sequently that it was necessary there should  
be some way of draining the system of this sup-

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abundance of blood necessarily generated, and  
that the uterus performed this office. But  
that it is not dependant on plethora may  
be easily proven, for if there be plethora in  
these cases it must be caused by five or six  
ounces of blood, and the loss of that quantity  
from any part of the system ought to be equally  
as effectual in relieving it. But this we  
know not to be the case, for if twenty, or thirty,  
or I might say forty  $\frac{3}{4}$  are taken it does not  
interrupt the discharge. Women also occasion-  
ally have vicarious hemorrhages from other  
parts of the body, as the nose, lungs &c. without  
affecting menstruation in the slightest degree.  $\times$   
Again, we find that women of weak and  
delicate constitutions menstruate as copiously  
as those of a plethoric habit.

Then objecting against general ple-  
thora <sup>as the cause</sup>, ~~convinced~~ <sup>convinced</sup> Bullen that it was erro-  
neous, and he substituted local plethora.

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He believed that the vessels of the Uterus became distended with blood and were consequently forced to discharge it. But Morgagni, who was an accurate observer and who attended particularly to this subject could not discover any distentions. Therefore we should be less rationally to suppose there must be some turbulence of the vessels, as this would be necessary, to supply the blood from which the Catamenial fluid is secreted.

The first objection to this theory is that it considers menstruation as a mere hemorrhage and farther it could only account for the first discharge. I would then ask what produces the second discharge?

Hornbullen acknowledges himself at a loss and was compelled to resort to the force of habit as an explanation. This tho is totally insufficient. The influence of habit could not be so soon established, nor could it be

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sufficient to produce even the third discharge. This theory must therefore be looked upon as very defective. X

But supposing habit to produce the second and all succeeding discharges, its power is sometimes very much diminished, and occasionally totally destroyed by interruption. Would not pregnancy and suckling which put a stop to it for twenty two months be a period sufficient to break the force of habit? In my opinion it certainly would. This theory then we also discard.

Chemistry next offered its aid in this obscure and difficult subject. Here too it was totally defective. It attributed the discharge to a fermentation in the blood which was said to be produced by the venereal disease. This was too absurd to last long and of course was soon discarded. X

It is by some <sup>thought</sup> that certain emotions of the

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mind may have an effect in producing this discharge. Doct<sup>r</sup> Clark of London mentions the case of a Lady who never had menstruated tho there was in the system a disposition to this evacuation, when hearing suddenly of the return of her husband from a voyage, tho the discharge was not actually induced yet he supposes from this intelligence this disposition farther increased, and the conceived, notwithstanding the catamenia did not make their appearance; in this case the Doct<sup>r</sup> thinks the disposition equivalent to the act itself. We readily admit that certain operations of the mind have a powerfull effect on the whole system. As a proof of which I will mention a case of a young Lady labouring under Amenorrhœa who (after all the usual remedies had proved abortive) was sent to the sea shore for the purpose of her

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thing; and on lifting a rail to knock down  
some fruit, she was very much alarmed at  
the sight of a large snake which lay  
under it and immediately menstruated.  
After this she had her regular periods.

To these emotions then let us ascribe  
the effects and not to the grossness of  
sexual enjoyment.

I might still, proceed  
to mention some other theory that have  
been entertained relative to the nature,  
and causes, of this discharge; but as I make  
no claims to originality, should deem it an  
unnecessary consumption of time; there-  
fore shall only farther remark, that not-  
withstanding the diversity of opinion on  
the subject still most are agreed that  
without this discharge having taken  
place no woman can become pregnant.  
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subject is but little more than a statement  
of probabilities founded on conjecture and  
hypothesis.

Irregularities of the Menstrual  
discharge I believe to be the most common sources of those  
diseases to which females are particularly liable,  
and which for many reasons calls for the particular  
attention and skill of the practitioners. All  
irregularities of the Catamenia may be compre-  
hended under the terms Retention, Suppressions  
excessive, ~~and~~ deficient, and painful menstruation.  
But I shall confine myself to the two first of these  
Viz. Retentions and Suppressions both of which are  
comprehended under the term

### Amenorrhoea

By which we are to understand a  
partial or total obstruction of the Menses in women  
arising from other causes than pregnancy, suckling  
and old age. Doct<sup>r</sup> Cullen in his classification  
of diseases places this genus in the class Locales,

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Menstruation as I have before observed, is a peculiar secretion of the Uterus and not blood. by this view of the subject we have an explanation of *Modus operandi* of *Emenagogues*, and of course we have to consider *Amenorrhoea* an interruption of the secretory action of the Uterus, and that the medicines which remove this, act so as to restore the healthy condition of the Uterus; on the precise condition of which the secretion depends. Notwithstanding I have previously stated that the Catamenia usually make their appearance between the age of fourteen and sixteen still occasionally we have astonishing precocity, all the organs of a woman appearing to be developed at the age of twelve or thirteen. As this is not looked upon as disease so a retardation two or three years, provided every thing else be proper and regular, cannot be called a disease.

The Uterus and ovaria must have arrived at certain state of perfection before this discharge

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can take place, and in some it may require a few  
years longer than in others, to arrive at this state.

When a woman in this country arrives at the age of  
eighteen without having menstruated she generally becomes  
uneasy, and often a Physician is consulted. If in such  
cases she is not in good general health, we may prescribe  
exercise, particularly on horseback, with some tonic.

If however there be nothing the matter but retention  
it is unnecessary to resort to medicines. The some  
times by way of complying with the solicitations  
of our patient, or her friends, we are compelled to  
make use of some remedy; in these cases a very good  
prescription is bread pills coloured with a little  
Rhubarb. By this means from the faith of the  
patient in her physician these pills may afford  
an agreeable stimulus to the mind, and in this  
way we gain time; nature effects the cure and  
the Physician gets the credit.

If on the contrary there be general disease it  
must be treated without any regard to the retention.

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We cannot develop the Uterus therefore must wait  
till it is stimulated into action by the Ovaries.  
When a gentle stimulus is necessary small doses of  
Astringent medicines are very good. The Astringent or  
compound Rehoul's pill should be freely employed. X

But in this case all other complaints we  
must first learn the exact condition of the  
system and apply them accordingly.

Under certain conditions of the system the ad-  
ministration of tonics particularly the preparations  
of Iron prove beneficial, such as Chalybeate water X  
tincture of Muriated Iron, or the Carbonas ferri  
combined with Myrrh. When we discover symptoms  
of menstruation as pains in the back, extending  
down the thighs &c we may then assist.

Madder at this time is highly recommended  
particularly by Doct<sup>r</sup> Guerin of this City.  
The dose is from ʒss to ʒj twice or three times a  
day.

The tincture of Guaiaac is also very good

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but is too stimulating to be used first. If there  
be activity in the pulse we always draw blood be-  
fore its exhibition. We are also allude to the state  
of the bowels.

Besides this general ~~remedies~~ plan of treatment,  
it has been also proposed to excite more directly the  
uterine action by marriage, and the use of cer-  
tain Emmenagogues. With respect to the latter  
part of the proposal, I am of opinion that if  
not judiciously employed they will do harm, and  
they do not generally succeed without the use of  
such means as tend to improve the general system.  
If retention should be accompanied with a plethoric  
state, the best plan is to use purgatives regularly,  
in a degree proportioned to their effect on the  
system, and make the patient take as much  
exercise as she can without producing fatigue.  
If however we should not succeed in curing  
the disease by this general plan of treatment we  
must then resort to the use of certain articles

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known by the name of Emenagogues. The first of which I shall mention is the Polygala Senega.

This under certain conditions of the system is looked upon as one of the best articles. The form in which it is usually exhibited is either the powder root, or in decoction, but the saturated decoction is generally preferred. If it excite nausea, which it is apt to do in a large quantity we then combine aromatics with it, as orange peel, or cinnamon &c. The usual dose is from three to  $\frac{z}{iv}$  in the twenty four hours; but when the menstrual effort is at hand and until the discharge is induced we should urge it as far as possible without causing its rejection. In the interval we are advised to lay it aside for a week or two; without this precaution, if the medicine does not lose its effect it is apt to become exceedingly nauseous and disgusting to the patient. During its exhibition the system is to be kept well regulated. Respecting this article, I shall only farther

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remark that I suspect it may be used in almost all forms of Amenorrhoea, if in prescribing it, a proper regard be had to the condition of the system.

The Savin is also an article which has been used with some advantage as an emenagogue. It was employed a half a century ago by Dr. Thomas Sydenham discourage, its use, and the confidence in the remedy was hence very much lessened, but it is lately revived and is used with much benefit in some weak forms of Amenorrhoea. The dose is  $\frac{x}{2}$  or  $\frac{xv}{ij}$  three or four times a day.

Madder as I before stated has been used as an emenagogue, and not without some benefit, Sydenham believed it possessed of some injurious qualities and hence rejected it, but by other Authors it has been highly extolled, particularly by the late Doct<sup>r</sup> Barton.

There are several other articles which are recommended as emenagogues, such as Cantharides, the common Rosemary, Phosphorus &c.

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but in the exhibition of the latter of these articles the greatest caution is necessary it being a most powerfull remedy. Even in the dose of  $\frac{ss}$  of a grain, it is said to produce a universal glow and excitement, and when properly regulated is <sup>by</sup> some supposed to be a very important article, and as possessing a more direct tendency to the organs of generation than almost any other article of the Materia Medica.

Agree I have only spoken of those medicines suited to cases where extreme atony and debility exists; for frequently a more relaxation exists requiring for its cure a set of remedies more permanent but less violent in their action than the above: I allude to Tonic's.

They are not properly *Emmenagogues*; being only so in as much as they restore the tone of the Uterus. The Tonicks most usually resorted to are some of the preparations of Iron; these are considered best, and their exhibition

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should be accompanied by the use of the cold bath, exercise, friction, change of air, a generous diet et cetera. As amongst the best and most common of the Chalybeate preparations, I shall mention the Limaturæ ferri in the dose of from  $\mathfrak{v}$  to  $\mathfrak{xx}$  grs and the Carbonas ferri in doses of from  $\mathfrak{z}$  to  $\mathfrak{xx}$  grs several times a day; the latter of these however, being unpleasant in this form, is scarcely ever given so; but combined with Peruv. bark, ginger, or some aromatic. The following formula is recommended by Doct<sup>r</sup> Chapman as rendering it more agreeable

R<sup>x</sup> Rust of Iron  $\mathfrak{z}$ ii

Peruv. Bark..... $\mathfrak{z}$ i

Raw? Ginger  $\mathfrak{z}$ ii Syrup q. s. to make into an Electuary to be given *pro re nata*.

But there is still another mode of exhibiting it; in the form of Chalybeate wines. Agreeing also with the Dr<sup>s</sup> prescription is the following

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℞ Muc. of Iron ℥ss  
" Gentian... ℥ss  
" Orange peel... ℥ss. put into a bottle of  
Port wine, expose to a moderate heat for two days  
and decant for use.

It is the practice with some to unite foetid  
gums with chalybeates; as *Asafoetida*, *Musk*,  
*Castoreum*, &c. My own conviction however  
is, that there is little good to be derived from  
them as emmenagogues, tho' they may prove bene-  
ficial in relieving Hysteria connected with  
*Amenorrhoea*.

In addition to what I have said in  
my ~~consultation~~ and humble manner relative  
to the treatment necessary to this form of the  
disease; I shall only add that unless the bowels  
be kept well regulated, and a corresponding  
attention be paid to the Arterial system, all  
our remedies will at last prove inefficient  
and unavailing. Before however dismissing

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the subject entirely, permit me to make a few observations on Suppression of the Catamenia, but having anticipated much relative to the treatment of this form of the disease in my preceding remarks, the treatment necessary to both being very similar, it only remains that I make a few observations and I shall have done.

Suppression of the Menses may be produced by a variety of causes, such as violent agitations of the mind, cold applied to the surface of the body, or even cold substances taken into the Stomach are said to produce the same effects. but when it is a consequence of some chronic and obstinate disease, such as Consumption, or dropsy, it would be both useless and hurtful to attempt by stimulating drugs to restore it. But in those cases where fear, or some similar cause, inducing debility of the frame, it is proper to interfere, both as the Suppression is a source of anxiety to the patient, and also as the

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natural means of restoration tend to amend the general system. It is proper in our curative plan to collect that Suppression may take place under different circumstances of the constitution. It may occur with a debilitated, Chlorotic condition in which case we are to proceed much in the same way as in Retention; and along with the Ronic plan of treatment, it will be proper to have recourse to the use of Emmenagogues, such as Savin, Hellebore, Myrrh, Madder &c.

About the time the Catamenia are expected to make their appearance we may derive great benefit from the exhibition of an Emetic, accompanied with the use of the warm bath, Semicupium, or pediluvium. But in Suppression, as in Retention we are to be governed very much by the state of the pulse. Should the pulse be strong we detract bloodily, fully tho in some instances the pulse is rather weak to lose this evacuation, yet there is too much action to use

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Stimulants in such cases we may exhibit. Madder in the dose of  $\mathfrak{z}\text{ss}$  two or three times a day. If however this does not succeed and we wish something more stimulating we may then resort to the use of the Vol. Tinct. of Guaiac. The following formula is highly recommended by Doct<sup>r</sup> Sweet

R Gum Guaiac.  $\mathfrak{z}\text{viii}$   
Carbonate of Soda  $\mathfrak{z}\text{iii}$   
Alcohol  $\mathfrak{z}\text{ss}$   
Proof Spts  $\mathfrak{M}\text{ij}$

Is to be given in the dose of  $\mathfrak{z}\text{ss}$  twice or three times a day. This prescription the L<sup>o</sup> says has never failed in his hands of effecting a cure in cases in which it was proper to use it.

The Black Willow as I have previously stated is considered a valuable article in the preparation of the Catamenias, this appears to be a remedy of ancient date, and was for a while entirely laid aside, as being less efficacious than some others; but its reputation has been lately

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resides in this Country and in Europe: and in this City is by some of the ablest Physicians thought to be one of the best Emmenagogues. Dr. Sydenham of its most sanguine advocates: he says he scarcely ever commences the cure of Amenorrhoea without the use of the Black Hellebore. It is given either in the form of Tinct, or the powd & leaves. The dose of the powder is  $\text{viii}$  or  $\text{xx}$  grs., of the Tinct, from  $\text{xxv}$  to  $\text{xxx}$  flts.

In addition to what I have said of these medicines best suited to the cure of Amenorrhoea their mode of exhibition, and the numerous circumstances necessary to be attended to in the treatment of this very distressing complaint, I shall only add two others: Blisters and a Salivation, the latter of which however is only resorted to in extreme in extreme cases; and by the Practitioner is considered a dernier ressource, or the *ultima ratio medicorum*.

Having thus delivered my observations



relative to the nature, and cure of Anemorrhoea,  
in as concise a manner as my time, and the  
limited experience which I have had on the  
subject would admit, I shall now close this essay,  
but to do this without an acknowledgment to  
the several Medical Professors of this Univer-  
sity, would be a breach of that duty which  
my feelings claim.

To you therefore Gentlemen; at least this  
small tribute of my esteem is due. Permit me  
then to present you with the sincere acknow-  
ledgments of a pupil, for the many opportu-  
nities of improvement your Lectures have affor-  
ded him.

With the assurance of my best wishes,  
that you may continue to enjoy all the plea-  
sure of success in the Science of Medicine,  
I now bid you,

Adieu.

